

# Iowa Disability Advocates Network (IDAN)

## Iowa Mental Health and Disability System Redesign

*The Iowa Disability Advocates Network (IDAN) supports an Iowa Mental Health and Disability System Redesign that provides for the following:*

1. **COMPREHENSIVE SYSTEM REDESIGN** – Implement a comprehensive system of mental health and disability services that is consistent with the principles and goals of the Olmstead Supreme Court Decision and Iowa’s Olmstead Plan, including but not limited to the following:
  - People with disabilities and their families must have a meaningful role in policy development.
  - Pursue regional administration and retain local delivery, and work to incorporate existing positions into the regional administration structure to promote consistency in the transition.
  - End the use of legal settlement and replace it with simple residency.
  - Fully integrate mental health and disability services with primary health care and substance use services.
  - Expand the Intellectual Disability Waiver to cover Developmental Disabilities, including those on the Autism spectrum.
  - Provide for core services that are individualized to support community living, including core services for those with brain injury.
  - Base services on individually determined need and individual preferences.
  - Adopt service models with an evidence base, that move Iowa in the direction of compliance with Olmstead principles.
  - Move toward providing supported as well as competitive employment opportunities for all, and create financial incentives for facility-based employment (sheltered workshops) service providers to shift to services focused on integrated employment that pay at least minimum wage.
  - Provide guidance and technical assistance for regions and providers.
  - Utilize performance base contracting and focus on consumer outcomes.
  - Prioritize initial focus on crisis services and sub-acute treatment options, including for those with brain injury.
  - Take advantage of federal funding opportunities associated with the Patient Protection and Affordable Care Act – *SF 2010 the **Balancing Initiative is one such opportunity.***
  - Pursue changes to Iowa’s commitment laws (Iowa Code Chapter 229) and provide alternatives to commitment such as: Crisis stabilization services and sub-acute care beds; Statewide access to Assertive Community Treatment; Statewide access to jail diversion programs and special needs courts.
  - Align revisions to Iowa Code Chapter 230A with regional administration structure.
  - Establish system transformation timeline with measurable short and long term goals.
2. **ADEQUATE FUNDING** - Adopt a stable funding structure for mental health and disability services that is adequate to maintain the current level of services in the short term, to support the goals for completing system redesign within five to seven years, and to maintain the system over time.
  - Provide sufficient State funding to prevent service cuts and address waiting lists during system redesign:  
\***\$65 million** is needed for SFY 2013 not the \$30.5M proposed by the Administration. The higher amount of **\$65M is needed to maintain the current level of non-Medicaid services and begin the first steps of redesign.**

- Establish a stable long-term funding formula for the redesigned mental health and disability services system, including:
  - State assumption of the non-federal share of all Medicaid services.
  - Authorizing the use of county funds for non-Medicaid services to provide equitable and flexible individualized services where cost-effective or needed to fill service gaps.
  - Setting provider reimbursement rates that are adequate to maintain and build community capacity.

**3. EXPANDING WORKFORCE CAPACITY – Enhance access to quality mental health and disability services by expanding the availability of knowledgeable and skilled professionals, paraprofessionals, and direct support workers.**

- Provide statewide access to competency-based training to recruit and retain mental health, brain injury, and disability services professionals and paraprofessionals, and direct support workers, and promote on-the-job training and mentoring to assure quality services are delivered.
- Implement incentive programs to recruit and retain mental health, brain injury, and disability services professionals and paraprofessionals, and direct support workers.
- Establish a statewide career path program for direct support workers based on the nationally recognized National Alliance of Direct Support Professional (NADSP) model.
- Train more peer support specialists and increase their utilization.
- Utilize technology, such as telemedicine, to increase access to psychiatric, brain injury, or other specialty services.
- Support statewide training and technical assistance that includes evidence-based practices to build provider capability to address co-occurring and multi-occurring conditions.
- Establish a standing task force to aggressively address current and future workforce shortages with the measures described above as well as others not yet identified, and which includes people with disabilities and family members.

**SUMMARY:** Iowans need access to a consistent and integrated system of community mental health and disability services. To accomplish that, we must have:

- A sound system redesign plan with measurable outcomes
- A stable and adequate funding structure
- Adequate workforce and provider capacity

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**IDAN Supporters of this Position Paper:**

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| 1. Access 2 Independence of the Eastern IA Corridor     | 14. Iowa CURE   |
| 2. AMOS (A Mid-Iowa Organizing Strategy)                | 15. Iowa Disability Advocates Network (IDAN)                  |
| 3. Arc of East Central Iowa                             | 16. Iowa Mental Health Planning Council                       |
| 4. Arc of Iowa  | 17. Iowa Olmstead Consumer Task Force                         |
| 5. Arc of Story County                                  | 18. Iowa Statewide Independent Living Council (SILC)          |
| 6. ASK Resource Center                                  | 19. Iowa Human Needs Advocates (IHNA)                         |
| 7. Brain Injury Association of Iowa                     | 20. NAMI of Greater Des Moines                                |
| 8. Disability Rights IOWA                               | 21. National MS Society - Upper Midwest Chapter               |
| 9. Epilepsy Foundation – Iowa                           | 22. NE Iowa Center for Independent Living (NEICIL)            |
| 10. Heritage Area Agency on Aging                       | 23. P.A.D.S. of Linn County                                   |
| 11. Illinois/Iowa Center for Independent Living (IICIL) | 24. South Central Iowa Center for Independent Living (SCICIL) |
| 12. Iowa Advocates for Mental Health Recovery           | 25. South West Iowa Center for Independent Living (SWICIL)    |
| 13. Iowa Autism Society                                 |   |